

LR391 – Review of Research on Paid Sick Leave and Pandemic Spread

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LR391 – Review of Research on Paid Sick Leave and Pandemic Spread

LR 391 requests an interim study to conduct a review of current academic literature and research examining the impact of paid sick leave policies on pandemic spread in various states and industries. This report summarizes key findings from over 40 studies of paid sick leave with a focus on the evidence concerning the impact of paid leave on reducing pandemic spread.

Paid Sick Leave and Pandemic Containment

Studies that assess the impact of paid sick leave on influenza or pandemic spread use a variety of methods to arrive at similar conclusions. Most fall into one of two broad categories: empirical studies or simulations. In empirical studies, scholars draw upon existing data such as health expenditure data or administer surveys to gather new data to examine the questions of the study. Scholars who conduct simulations generate findings from models that predict outcomes from playing out various scenarios. Simulations can test questions and ideas for which no current data exist. For example, simulations can test the differential impact of various pandemic control strategies given particular pandemic spread assumptions and compliance assumptions to assess the impact of containment strategies before a pandemic hits. Lessons can be learned to avoid pandemic spread without communities bearing the consequences of learning the effectiveness of strategies by trial and error.

Some lessons in the current empirical literature on pandemic spread come from experiences with H1N1. In this line, Kumar and colleagues administered a survey to a national sample with particular attention to the inclusion of Hispanic and African American participants in 2010. Their analysis tested various predictors of influenza symptoms (ILI or Influenza Like Illness). The research tested for various determinants of potential exposure to H1N1 and found that after controlling for these other factors, lack of access to paid sick leave lead to higher levels of influenza spread². The study also found Hispanics had a higher risk of infection due to a disproportionate lack of access to paid sick leave and the number of children in their households even after factoring in the impacts of differences in income and education. They estimate that the lack of paid sick leave creates a risk of 5 million additional cases of influenza nationally with an expected increase of 1.2 million cases among Hispanics³. They conclude that paid sick leave mandates could reduce morbidity from influenza particularly among Hispanics⁴.

Drago and Miller also look to the N1H1 experience to analyze influenza spread. They assess stay at home compliance by workers during that time period. Using data from the Centers for Disease Control and the Bureau of Labor Statistics, they conclude that nearly 26 million employed Americans were likely infected with H1N1 in 2009, but that only 18 million employees took even a part of a week off. From these figures they conclude that almost 18

² Supriya Kumar et al., “The Impact of Workplace Policies and Other Social Factors on Self-Reported Influenza-like Illness Incidence during the 2009 H1N1 Pandemic,” *American Journal of Public Health*, 2012, <https://doi.org/10.2105/AJPH.2011.300307>.

³ Kumar et al.

⁴ Kumar et al.

million workers did not comply with recommendations to stay home if sick with influenza ⁵. Heymann and colleagues similarly use national data to estimate that at least 20 million Americans go to work sick, which they attribute to lack of access to paid sick leave ⁶.

Piper and colleagues use existing data from the 2009 Medical Expenditure Panel Survey to analyze employees' decisions to stay home from work if they or their child experiences illness, including influenza. After accounting for various factors that may influence influenza exposure, as well as factoring in possible effects of income, education, and income, they find a higher probability that a worker will stay home if the worker has access to paid sick leave ⁷. The impact of paid sick leave on the probability of staying home was even greater for Hispanics than for non-Hispanic Whites. They conclude that paid sick leave is likely to reduce the spread of influenza by encouraging more employees to stay home from work when sick ⁸.

The results from the Kumar and Piper studies highlight the added importance of paid sick leave to reduce pandemic spread for Hispanics. In an article that reviews findings from the American Time Use Survey Leave Module, the Annual Social and Economic Supplement to the Current Population Survey, the National Study of the Changing Workforce, and the Survey of Income and Program Participation, Bartel and colleagues consistently find that Hispanic workers have lower rates of paid-leave access and use than their White non-Hispanic counterparts ⁹. Statistics from the U.S. Bureau of Labor Statistics confirm this gap. According to a U.S. Bureau of Labor Statistics 2019 report, 49.9% of Hispanics have access to paid sick leave in the workplace compared to 69.2% of Non-Hispanic Whites ¹⁰. A similar but smaller gap exists for Blacks, with 62.6% having access to paid sick leave compared to 66.3% of Whites having access to paid sick leave ¹¹.

Several simulation studies point to the importance of paid sick leave as a key component of an effective pandemic containment strategy. Halloran and colleagues examine the predicted effectiveness of three different pandemic control models and find that a “liberal leave” policy plays a role as a component of Non-Pharmaceutical Interventions (NPI) that reduce transmission ¹². Liao and colleagues develop a model to test different assumptions about the honesty of

⁵ Robert Drago and Kevin Miller, “Sick at Work: Infected Employees in the Workplace During the H1N1 Pandemic,” no. February (2010): 14, <http://www.iwpr.org/publications/pubs/sick-at-work-infected-employees-in-the-workplace-during-the-h1n1-pandemic>.

⁶ Jody Heymann et al., “Ensuring a Healthy and Productive Workforce: Comparing the Generosity of Paid Sick Day and Sick Leave Policies in 22 Countries,” *International Journal of Health Services*, 2010, <https://doi.org/10.2190/HS.40.1.a>.

⁷ Kaitlin Piper et al., “Paid Sick Days and Stay-At-Home Behavior for Influenza,” *PLoS ONE*, 2017, <https://doi.org/10.1371/journal.pone.0170698>.

⁸ Piper et al.

⁹ Ann Bartel et al., “Racial and Ethnic Disparities in Access to and Use of Paid Family and Medical Leave: Evidence from Four Nationally Representative Datasets,” *Monthly Labor Review*, 2019, <https://doi.org/10.21916/mlr.2019.2>.

¹⁰ U.S. Bureau of Labor Statistics, “Access to and Use of Leave -- 2017-2018 Data from the American Time Use Survey,” 2019.

¹¹ U.S. Bureau of Labor Statistics.

¹² M Elizabeth Halloran et al., “Modeling Targeted Layered Containment of an Influenza Pandemic in the United States,” *Proceedings of the National Academy of Sciences of the United States of America* 105, no. 12 (2008): 4639–44, <http://www.jstor.org.cuhsl.creighton.edu/stable/25461475>.

workers taking sick leave and the optimal number of paid sick days for societal benefit. They conclude that their “research shows that paid sick leave can be used as an effective policy instrument for controlling epidemics”¹³.

In a simulation of pandemic spread in Allegheny County, Pennsylvania, Kumar and colleagues conduct analysis to clarify the impact of paid sick leave on the probability of staying home and consequently on pandemic spread. Their simulation builds on paid sick leave data from the U.S. Bureau of Labor Statistics and develops assumptions about epidemic parameters. Their simulation predicts that over 10% of attacks come from workplace transmission, largely because of sick employees going to work. Their simulation shows that universal paid sick days would reduce infections, with even greater reductions predicted if employees are offered a small number of “flu days”¹⁴.

Compliance with a 10 day quarantine serves as an important suppressing factor on pandemic spread in simulations developed by Davey and colleagues¹⁵. They use an agent-based model to simulate a broad range of pandemic conditions and containment strategies with an assumption that these agents have multiple and overlapping social networks. They model effective pandemic control even under conditions like that of the 1918 flu with a 10 day quarantine provision as part of the containment strategy. While this study does not explicitly incorporate paid sick leave, empirical studies strongly suggest that paid sick leave would be important to get compliance with the 10 day quarantine provision of the pandemic control strategy.

Paid Sick Leave and Vaccination Rates

Another way that paid sick leave impacts influenza or pandemic spread is through its impact on vaccination rates. Two studies provide evidence that paid sick leave increases vaccination rates.

Kim and Mountain theorize that paid sick leave influences vaccination decisions differently for low-income and high-income workers. They then use data from the 2009-2010 National H1N1 Flu Survey to test the impact of paid sick leave on vaccination rates. They find that paid sick leave encourages both groups (low income and high income workers) to obtain vaccinations at higher rates¹⁶.

Analysis of Medical Expenditure Panel Survey data from 2006-2010 demonstrates that paid sick leave increases vaccination rates¹⁷. Their empirical model predicts that vaccinations would

¹³ (Liao et al. 2013, pg 213)

¹⁴ Supriya Kumar et al., “Policies to Reduce Influenza in the Workplace: Impact Assessments Using an Agent-Based Model,” *American Journal of Public Health*, 2013, <https://doi.org/10.2105/AJPH.2013.301269>.

¹⁵ Davey VJ et al., “Effective, Robust Design of Community Mitigation for Pandemic Influenza: A Systematic Examination of Proposed {US} Guidance.,” *{PloS} One*, 2008.

¹⁶ Namhoon Kim and Travis P. Mountain, “Do We Consider Paid Sick Leave When Deciding to Get Vaccinated?,” *Social Science and Medicine*, 2018, <https://doi.org/10.1016/j.socscimed.2017.12.011>.

¹⁷ Fernando A. Wilson, Yang Wang, and Jim P. Stimpson, “Universal Paid Leave Increases Influenza Vaccinations among Employees in the U.S.,” *Vaccine*, 2014, <https://doi.org/10.1016/j.vaccine.2014.02.084>.

increase by 1.6 million if universal paid sick leave existed, which they project would result in 18.2 thousand fewer health care visits and 63.8 thousand fewer work absences from influenza ¹⁸.

Paid Sick Leave and Spread of Illness

The studies in the previous section focus specifically on the impact of paid sick leave on influenza or pandemic illness. Several studies demonstrate the impact of paid sick leave on presenteeism (working while sick) and the spread of a broader range of diseases. Using data from the 2013 National Health Interview Survey (NHIS), DeRigne and colleagues find that both full-time and part-time workers without paid sick leave are more likely to attend work while sick ¹⁹, which they argue creates a public health argument for paid sick leave.

Scholars with the University of Chicago NORC research center created a survey to gather data to examine the impact of paid sick leave based on self-reported behaviors by the survey participants. Their research shows that paid sick days will not necessarily eliminate presenteeism, but that paid sick leave can be expected to greatly reduce it. They find that 55% of those without paid sick leave report attending work while sick while only 37% of those with sick leave report the same ²⁰. Similarly they find that those with paid sick leave are 10% less likely to send a sick child to school or daycare ²¹.

A survey by the Harvard School of Public Health Project on the Public and Biological Security examined patterns in respondents' attitudes and beliefs about taking time from work for illness. Blendon and colleagues analyze this data and find that a little over half (57%) of the respondents report that they would stay home from work if recommended to do so by public health officials while 35% indicate that they would go to work if their employer told them to and 22% worried that their employer would require them to work even if they were sick ²². Only 35% of the respondents reported beliefs that they would be paid if they stayed home, with low-income respondents being significantly less likely to expect that they would be paid if they did not report to work because of a recommendation by a public health official ²³. Only 13% of low-income workers (less than \$25,000 per year) reported beliefs that they could stay home during a pandemic outbreak ²⁴.

Kavanaugh and colleagues use data from flu-directed school closures to examine patterns in parents taking time off of work to care for quarantined children. While they find that parents with paid leave are more likely to stay home with their kids, the difference is fairly small (42% compared to 58%). However, their research uncovers a substantial financial penalty that those

¹⁸ Wilson, Wang, and Stimpson.

¹⁹ (DeRigne, Stoddard-Dare, and Quinn 2016)

²⁰ Jibum Smith, Tom W, Kim, "Paid Sick Days: Attitudes and Experiences" (Chicago, 2010), <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-sick-days/paid-sick-days-attitudes-and-experiences.pdf>.

²¹ Smith, Tom W, Kim.

²² Robert J Blendon et al., "Public Response to Community Mitigation Measures for Pandemic Influenza," *Emerging Infectious Disease Journal* 14, no. 5 (2008): 778, <https://doi.org/10.3201/eid1405.071437>.

²³ Blendon et al.

²⁴ Blendon et al.

parents without paid sick leave pay. Among the households of parents who did not have paid sick leave, 42% experienced negative financial consequences, such as an inability to pay a bill, from staying home to care for quarantined children ²⁵.

Data from the 2003 and 2004 Medical Expenditure Panel Survey allows analysis of access to paid leave, household income, firm size, and whether parents take time away from work to care for themselves or their children. Using this data, Clemans-Cope and colleagues find that parents with access to paid leave were more likely to stay home from work to care for themselves or others ²⁶. They also find that the relationship is even stronger for parents who most need to be able to stay home, namely those with children in fair or poor health and those in households where both parents work full time ²⁷.

Access to Paid Sick Leave

In the absence of federal legislation requiring paid sick leave (outside of temporary provisions for COVID-19 that will be discussed later in this report) and the lack of policies requiring paid sick leave in most states, access to paid sick leave in the United States largely varies by workplace. Survey research by scholars with the University of Chicago NORC research center found that fewer workers report access to paid sick leave as a benefit (64%) than receive other employee benefits such as health care insurance (81%), dental care insurance (72%), life insurance (68%) and pensions (67%) ²⁸. An even smaller percent report having paid sick leave that can be used to care for sick family members (47%) ²⁹.

A March 2020 report from the Bureau of Labor Statistics provides a recent snapshot of access to paid sick leave in the United States. The report uses Department of Labor data on employee benefits and finds that 78% of employees have access to paid sick leave with full time employees being much more likely to have this access (88%) than part time workers (45%) ³⁰. The report shows regional variation with employees in the Midwest being less likely to have access to paid sick leave (73%) ³¹. Consistent with other studies, the March 2020 data reveal that low income workers still lag far behind in access to paid sick leave. Only 33% of those in the lowest 10% of incomes and 52% of those in the lowest 25% of incomes have access to paid sick leave ³². This compares to access rates of 94% and 95% for those in the highest 25% and highest 10% of incomes respectively ³³. The Bureau of Labor Statistics Report does not provide results by state.

²⁵ Anne M. Kavanagh et al., “Leave Entitlements, Time off Work and the Household Financial Impacts of Quarantine Compliance during an H1N1 Outbreak,” *BMC Infectious Diseases*, 2012, <https://doi.org/10.1186/1471-2334-12-311>.

²⁶ Lisa Clemans-Cope et al., “Access to and Use of Paid Sick Leave among Low-Income Families with Children,” *Pediatrics*, 2008, <https://doi.org/10.1542/peds.2007-3294>.

²⁷ Clemans-Cope et al.

²⁸ Smith, Tom W, Kim, “Paid Sick Days: Attitudes and Experiences.”

²⁹ Smith, Tom W, Kim.

³⁰ U.S. Department of Labor and U.S. Department of Labor Statistics, “National Compensation Survey: Employee Benefits in the United States, March 2020, Bulletin 2793,” 2020.

³¹ U.S. Department of Labor and U.S. Department of Labor Statistics.

³² U.S. Department of Labor and U.S. Department of Labor Statistics.

³³ U.S. Department of Labor and U.S. Department of Labor Statistics.

The most recent analysis by state appears to be completed in 2010. In this study only 58% of Nebraskans report access to paid sick leave ³⁴.

The most recent statistics from the Bureau of Labor Statistics do not break down access to paid sick leave by age or gender. However, Ghilarducci and Farmand use data from the Centers for Disease Control 2018 National Health Interview Survey to calculate disparities in access to paid sick leave for workers age 50 and over in various industries. They find that older workers are less likely to have access to paid sick leave overall and less likely to have access to paid sick leave within various industries with higher risks for pandemic spread such as health care support, cleaning, and transportation ³⁵. They argue that the increased vulnerability of older adults to COVID-19 and the prevalence of older workers in industries with higher risk factors makes access to paid sick leave for older workers particularly important. Heymann and colleagues argue that gaps in paid leave for part time and low wage earners disproportionately impact women because they disproportionately fall into these work categories ³⁶.

Effects of Paid Sick Leave Policies

Several empirical studies analyze the impact of paid sick leave on the spread of disease by examining differences that result from the passage of paid sick leave policies in specific communities. Prior to 2020, only 13 states and DC had paid sick leave laws in place (Arizona, California, Connecticut, Maine, Maryland, Massachusetts, Michigan, Nevada, New Jersey, Oregon, Rhode Island, Vermont and Washington) ³⁷. California's policy has been in place the longest and thus has had the most study. Additionally, a few municipalities including New York City and San Francisco have passed local paid sick leave laws that have then been studied.

Hsuan and colleagues find a decrease in food borne illness rates in jurisdictions that pass paid sick leave policies. They assess before and after comparisons for jurisdictions that pass paid sick leave as well as comparisons between jurisdictions. They find a strikingly lower (22%) foodborne illness rate in jurisdictions with stronger paid sick leave policies ³⁸.

In the first year of its implementation, Washington State's Paid Leave Law was estimated to have reduced presenteeism by 8% ³⁹ This analysis used a mix of before-after comparison and jurisdictional comparison to assess this impact. Other studies of the impact of paid family leave policies suggest that the relatively weak reduction in presenteeism in the first year may well be due to the fact that many workers do not know that they are entitled to paid sick leave after the

³⁴ Institute for Women's Policy Research, "Access to Paid Sick Days in the States, 2010," 2010.

³⁵ Teresa Ghilarducci and Aida Farmand, "Older Workers on the COVID-19-Frontlines without Paid Sick Leave," *Journal of Aging and Social Policy*, 2020, <https://doi.org/10.1080/08959420.2020.1765685>.

³⁶ Heymann et al., "Ensuring a Healthy and Productive Workforce: Comparing the Generosity of Paid Sick Day and Sick Leave Policies in 22 Countries."

³⁷ National Conference of State Legislatures, "Paid Sick Leave," 2020, <https://www.ncsl.org/research/labor-and-employment/paid-sick-leave.aspx>.

³⁸ Charleen Hsuan et al., "Association of Paid Sick Leave Laws With Foodborne Illness Rates," *American Journal of Preventive Medicine*, 2017, <https://doi.org/10.1016/j.amepre.2017.06.029>.

³⁹ Daniel Schneider, "Paid Sick Leave in Washington State: Evidence on Employee Outcomes, 2016-2018," *American Journal of Public Health*, 2020, <https://doi.org/10.2105/AJPH.2019.305481>.

policy passes. Six years after California passed its paid family leave policy, only 48.6% of California workers reported knowing about the policy⁴⁰. Unfortunately, Milkman and Applebaum find that the workers most in need of paid sick leave, like low wage workers, young workers and disadvantaged minority workers, are the least likely to know about the benefit⁴¹.

Limits in the coverage of paid sick leave policies also curtail their public health benefits. For example, Hall and colleagues find that the New York City paid sick leave law left out a significant number of workers in retail, food service and health care jobs despite the risks that these jobs pose for disease transmission⁴². In contrast, the San Francisco Paid Sick Leave Ordinance provides access to paid sick days for part-time and temporary workers as well as full time workers. Consequently, the San Francisco paid sick leave policy covers those who tend to be exempted from paid sick leave in other jurisdictions and as a result Hispanic and low-income employees benefit from the policy in ways not seen in other jurisdictions⁴³.

COVID-19 Paid Sick Leave Policies

In response to COVID-19, Congress enacted The Families First Coronavirus Response Act, which requires employers to provide temporary paid sick leave to allow employees to take up to two weeks of sick time at full pay for quarantining or caring for a family member who is quarantined or for caring for children home due to COVID school closures until December 31, 2020. The Act provides some provisions for longer leaves at reduced pay. Congress reimburses businesses who pay for this required paid sick leave through a credit on the employer portion of the Social Security tax. The provisions of the act apply to employers with less than 500 employees with exemption provisions for employers with less than 50 employees. Consequently, the law applies most effectively for employees who work at firms with 50-499 employees, which leaves out the large number of workers employed by small businesses and large firms.

A recent U.S. Bureau of Labor Statistics report shows that 25% of employers created or modified paid sick leave provisions in response to COVID and The Families First Coronavirus Response Act⁴⁴. Of those establishments that modified or created paid sick leave, 20% added 6 to 10 days and 37% added 10 or more days, suggesting that up to 57% of employers provided paid sick leave consistent with the two-week provisions of the law⁴⁵. A breakdown of days of paid leave

⁴⁰ Ruth Milkman and Eileen Appelbaum, “Low-Wage Workers and Paid Family Leave:,” in *What Works for Workers?*, ed. Ruth Milkman et al., Public Policies and Innovative Strategies for Low-Wage Workers (Russell Sage Foundation, 2014), 305–28, <http://www.jstor.org/stable/10.7758/9781610448192.16>.

⁴¹ Ruth Milkman and Eileen Appelbaum, *Unfinished Business : Paid Family Leave in California and the Future of U.S. Work-Family Policy* (Ithaca: ILR Press, 2013), <https://login.cuhsil.creighton.edu/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=e000xna&AN=671533&site=ehost-live>.

⁴² Gerod Sharper Hall et al., “Workers Not Paid for Sick Leave after Implementation of the New York City Paid Sick Leave Law,” *Journal of Urban Health*, 2018, <https://doi.org/10.1007/s11524-017-0218-2>.

⁴³ Robert Drago, Vicky Lovell, and Lenora Cole, “San Francisco’s Paid Sick Leave Ordinance: Outcomes for Employers and Employees,” *Institute for Women’s Policy Research*, 2011.

⁴⁴ U.S. Bureau of Labor Statistics, “Supplemental Data Measuring the Effects of the Coronavirus (COVID-19) Pandemic on Sick Leave Plans,” 2020.

⁴⁵ U.S. Bureau of Labor Statistics.

by number of employees shows that nearly 60% of those with 100 or more employees added 6-10 days ⁴⁶. However, the Families First Coronavirus Response Act only requires employers to provide paid sick leave until December 31, 2020 and most (90%) of the employers report that their changes to paid sick leave are only temporary ⁴⁷.

At the state level, Colorado (SB20-205) and New York (S 8091) and Washington D.C. (§ 32–531.02a) passed laws to create or expand access to paid sick leave due to the COVID pandemic ⁴⁸. Colorado SB20-205 requires that all employers provide paid sick leave consistent with the Federal Families First Act from July through December 2020. New York S 8091 requires large employers to provide 14 days of paid sick leave for quarantine or isolation related to COVID-19. Mid-size and small employers worth more than \$1 million must provide 5 days. Any worker who does not receive 14 days of paid sick leave can apply for state quarantine leave benefits and the state provides eligible employees full wage replacement up to 14 days using a combination of state Temporary Disability Insurance and PFML benefits. Colorado SB20-205 goes beyond the pandemic leave provisions to also phase in permanent state sick and safe leave in 2021 that requires that employees can earn one hour of paid sick and safe leave for every 30 hours worked up to 48 hours a year.

Paid Sick Leave and Other Health Impacts

Numerous studies identify positive health benefits of access to paid sick leave beyond its benefit in preventing the spread of pandemics and other diseases. Analysis of the impact of paid sick leave on mortality show that having paid sick leave was associated with up to 22% of a lower hazard of all-cause mortality with a 24% lower hazard of dying from heart disease and a 35% lower hazard of dying from unintentional injuries ⁴⁹.

Paid sick leave increases the likelihood that individuals obtain preventive health care. National Health Interview Survey data reveal striking effects with those lacking paid sick leave being 3 times more likely to skip medical care for themselves and 1.6 times more likely to forgo medical care for their family compared to adult workers with paid sick leave benefits ⁵⁰. The data also show that the greatest risk for delaying or forgoing care exists for low-income workers ⁵¹. In a follow up study, DeRigne and colleagues assess the odds of preventive health care for different lengths of paid sick leave and find that 10 days of paid sick leave provides the most significant impact ⁵².

Paid sick leave also reduces emergency room use for non-emergency health care. Using National Health Interview Survey data from 2012 to 2014, Bhuyan and colleagues find that paid

⁴⁶ U.S. Bureau of Labor Statistics.

⁴⁷ U.S. Bureau of Labor Statistics.

⁴⁸ The National Law Review, “State Law Round-Up: COVID-19 State and Local Paid Sick Leave Law Developments (US),” 2020; National Conference of State Legislatures, “Paid Sick Leave.”

⁴⁹ Patricia Stoddard-Dare et al., “Paid Sick Leave and Psychological Distress: An Analysis of U.S. Workers,” *American Journal of Orthopsychiatry*, 2018, <https://doi.org/10.1037/ort0000293>.

⁵⁰ (DeRigne, Stoddard-Dare, and Quinn 2016)

⁵¹ (DeRigne, Stoddard-Dare, and Quinn 2016)

⁵² (DeRigne et al. 2018)

sick leave reduces the likelihood of a worker engaging in moderate emergency room use by 14% and reduces the likelihood of a worker engaging in heavier repeated emergency room use by 32%⁵³. Survey research from NORC of the University of Chicago also shows strong effects of paid sick leave on emergency room use with twice as many respondents reporting use of an emergency room for care for themselves (20% versus 10%) and more than twice as many (18% versus 7%) reporting visiting an emergency room to take a family member for care because they could not get time off of work⁵⁴.

Paid sick leave also matters for mental health. Using data from the 2015 National Health Interview Survey, Stoddard-Dare and colleagues find that workers without paid sick leave have a statistically significantly higher level of psychological distress and that workers without paid sick leave report distress that interferes “a lot with their life” at rates 1.45 times greater than that reported by those with paid sick leave⁵⁵. The models that provide these results account for other factors that lead to psychological distress and show that paid sick leave has this strong additional impact on the mental health of workers.

Economic Impacts of Paid Sick Leave

While this report focuses primarily on the health impacts of paid sick leave, the large body of research that demonstrates the positive economic impacts of paid sick leave warrants attention as well.

One area of research related to the economic effects of paid leave considers the economic impact of workers coming to work sick. Goetzel and colleagues find that across 10 health conditions the greatest cost for employers stems from presenteeism (sick workers coming to work)⁵⁶. Their analysis shows that 61% of employer costs across these 10 health conditions results from lowered worker productivity, which exceeds the cost of other components of these health conditions such as inpatient and outpatient care and pharmaceutical costs⁵⁷.

Presenteeism also costs employers through the transmission of disease to other workers, which increases overall absenteeism. One study calculates that providing paid sick leave could have saved employers up to \$1.88 billion per year in reduced absenteeism costs due to influenza between 2007 and 2014⁵⁸. Skåtun also finds that firms gain economically by offering paid sick leave using an economic model that incorporates the cost of illness spreading

⁵³ Soumitra S. Bhuyan et al., “Paid Sick Leave Is Associated with Fewer ED Visits among US Private Sector Working Adults,” *American Journal of Emergency Medicine*, 2016, <https://doi.org/10.1016/j.ajem.2015.12.089>.

⁵⁴ (Smith and Kim 2010)

⁵⁵ Stoddard-Dare et al., “Paid Sick Leave and Psychological Distress: An Analysis of U.S. Workers.”

⁵⁶ Ron Z. Goetzel et al., “Health, Absence, Disability, and Presenteeism Cost Estimates of Certain Physical and Mental Health Conditions Affecting U.S. Employers,” *Journal of Occupational and Environmental Medicine*, 2004, <https://doi.org/10.1097/01.jom.0000121151.40413.bd>.

⁵⁷ Goetzel et al.

⁵⁸ Abay Asfaw, Roger Rosa, and Regina Pana-Cryan, “Potential Economic Benefits of Paid Sick Leave in Reducing Absenteeism Related to the Spread of Influenza-Like Illness,” *Journal of Occupational and Environmental Medicine*, 2017, <https://doi.org/10.1097/JOM.0000000000001076>.

in the workplace to other healthy workers⁵⁹. Stearns and White examine the impact of paid sick leave on absenteeism from a different perspective. They examine leave taking in two jurisdictions with paid sick leave (Washington D.C. and Connecticut) and find that paid leave policies decreased the overall level of leave-taking suggesting that paid sick leave reduces absenteeism costs by allowing sick workers to stay home instead of coming to work and making other employees sick⁶⁰.

An analysis of the economic consequences of various employee benefit options shows that paid sick leave positively affects firm profits⁶¹. The authors note that this impact likely results from two different dynamics. First, employees may be satisfied with lower wages if they receive paid sick leave benefits. Second, employees with paid sick leave are more productive at work due to a lack of stress from worry about their ability to care for themselves and their family and due to greater job satisfaction from a job that provides paid sick leave. They argue that the economic benefits to the firm accrue even though (or perhaps because) few workers actually take paid sick leave time. The benefits of knowing that it is available drive profits⁶².

Paid sick leave also provides economic benefits by decreasing employee turnover. Hill uses Medical Expenditure Panel data and finds that paid sick leave decreases the probability of job separation by 25%, with the association being the strongest for workers without paid vacation leave and for mothers⁶³. Above and beyond the profitability impact that comes from the costs of recruiting and training new workers, Casey and Warlin argue that employee retention affects firm profits through its impact on customer satisfaction⁶⁴. They review studies that predict that a 5% increase in customer satisfaction generates 25% to 85% increases in profitability and demonstrate the connection between employee retention and customer satisfaction in various industries⁶⁵.

Another way to assess the economic impact of paid sick leave is through studies that examine the economic impact of state and local paid sick leave policies. A study of the California Paid Family Leave program revealed that 90% of employers report either positive or no negative effect on profitability⁶⁶. An analysis of the San Francisco paid sick leave policy, which is the broadest paid sick leave policy across U.S. states and localities, demonstrated employer benefits such as increasing business growth, reducing employee turnover and promoting a productive

⁵⁹ John Douglas Skåtun, "Take Some Days off, Why Don't You? - Endogenous Sick Leave and Pay," *Journal of Health Economics* 22, no. 3 (May 1, 2003): 379–402, [https://doi.org/10.1016/S0167-6296\(02\)00102-9](https://doi.org/10.1016/S0167-6296(02)00102-9).

⁶⁰ Jenna Stearns and Corey White, "Can Paid Sick Leave Mandates Reduce Leave-Taking?," *Labour Economics*, 2018, <https://doi.org/10.1016/j.labeco.2018.01.002>.

⁶¹ Christine Siegwarth Meyer, Swati Mukerjee, and Ann Sestero, "Work-Family Benefits: Which Ones Maximize Profits? (Undetermined)," *Journal of Managerial Issues* 13, no. 1 (April 15, 2001): 28–44, <https://login.cuhsl.creighton.edu/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=ofs&AN=510150284&site=ehost-live>.

⁶² Meyer, Mukerjee, and Sestero.

⁶³ Heather D. Hill, "Paid Sick Leave and Job Stability," *Work and Occupations*, 2013, <https://doi.org/10.1177/0730888413480893>.

⁶⁴ Thomas F Casey and Karen Warlin, "Retention and Customer Satisfaction," *Compensation & Benefits Review* 33, no. 3 (May 1, 2001): 27–31, <https://doi.org/10.1177/08863680122098388>.

⁶⁵ Casey and Warlin.

⁶⁶ Eileen Appelbaum and Ruth Milkman, "Leaves That Pay: Employer and Worker Experiences with Paid Family Leave in California," *Center for Economic and Policy Research*, 2011.

workplace⁶⁷. Only one out of seven employers reported any adverse effects on profitability⁶⁸. An evaluation of the Jersey City County Council paid sick leave ordinance by the Rutgers Center for Women and Work found that after just one year of implementation over 40% of employers who changed their paid sick leave policies because of the ordinance reported economic benefits such as increases in productivity, a higher quality of new hires, or a reduction in turnover⁶⁹.

Conclusion: Lessons for Nebraska

This review of over 40 studies of paid sick leave reveals many positive benefits associated with paid sick leave. Paid sick leave provides valuable public health benefits, including reducing pandemic and influenza spread. The health benefits also include reductions in the spread of other diseases, decreases in mortality, increases in preventive care, drops in emergency room use and reductions in levels of psychological distress. Unfortunately, lower access to paid sick leave and poorer knowledge of paid sick leave policies disproportionately reduce the benefits for Hispanics, lower income workers, part time workers, women and older workers. Provisions in paid sick leave policies in Nebraska to cover part-time work, low-wage work, and small firms would reduce this disparity as would provisions to improve the awareness of workers when paid sick leave policies pass. Workers cannot benefit from paid sick leave if they do not know that it exists. Above and beyond the health benefits of paid sick leave, multiple studies confirm the valuable economic benefits of paid sick leave and paid sick leave policies on employers and profitability.

While the positive benefits of paid sick leave exist across all industries, 2020 brought particular attention to the importance of paid sick leave in the meatpacking industry in Nebraska. As COVID-19 surged in Nebraska, meatpacking plants emerged as critical areas of COVID spread within the facilities and within the communities surrounding the facilities. Public health experts from University of Nebraska Medical Center developed playbooks for various industries including meatpacking plants. These playbooks recommend requiring workers to stay home when sick. The meatpacking playbook further urges plants to ensure that they do not punish or adversely affect workers who need to stay home for health reasons⁷⁰. Several public health and health ethics experts from Nebraska go a step further and recommend paid sick leave as a critical strategy to control COVID spread in meatpacking plants and the surrounding communities⁷¹. However, surveys of meatpacking workers in Nebraska indicate that less than 30% of workers in these plants believe that they have access to paid sick leave (Appendix 1). Moreover, workers in the Midwest (including Nebraska) report pressure from managers to return to work and express concern about accumulating absence points if they miss work for COVID⁷².

⁶⁷ Drago, Lovell, and Cole, "San Francisco's Paid Sick Leave Ordinance: Outcomes for Employers and Employees."

⁶⁸ Drago, Lovell, and Cole.

⁶⁹ D. Lindemann and D. Britton, "Earned Sick Days in Jersey City : A Study of Employers and Employees at Year One A REPORT OF THE CENTER FOR WOMEN AND WORK," *Center for Women and Work at Rutgers, the State University of New Jersey Publication.*, 2015.

⁷⁰ Joselyn Herstein et al., "Meat Processing Facility COVID 19 Playbook," 2020.

⁷¹ Athena K Ramos et al., "Invisible No More: The Impact of COVID-19 on Essential Food Production Workers," *Journal of Agromedicine*, September 18, 2020, 1–5, <https://doi.org/10.1080/1059924X.2020.1814925>.

⁷² Athena Ramos, "Concerns and Perceptions of COVID-19 among Meatpacking Plant Workers in Nebraska," 2020.

The Centers for Disease Control and the Nebraska Department of Health and Human Services stress the importance of staying home if experiencing COVID symptoms⁷³. This advice builds on a broad foundation of scholarly studies that stress the importance of isolation and quarantine to reduce pandemic spread, including many discussed in this report. The recommendation to stay home when sick raises the question of how Nebraskans can afford to follow this recommendation if they do not have access to paid sick leave. Based on this review of research, passing a paid sick leave policy in Nebraska would lessen pandemic spread as well as the spread of other diseases. Nebraska workers would have better health outcomes and greater work satisfaction and Nebraska businesses would benefit from lower turnover, and higher worker productivity and greater profitability.

⁷³ CDC, “COVID-19 (Coronavirus Disease),” 2020, <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html>; Nebraska Department of Health and Human Services, “COVID-19 Protect Yourself and Others,” 2020, <http://dhhs.ne.gov/Pages/COVID-19-Protect-Yourself-and-Others.aspx>.

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Concerns and perceptions of COVID-19 among meatpacking plant workers in Nebraska



Background: A survey was conducted between May 7-May 25, 2020 of 443 meatpacking workers across Nebraska to assess their concerns and perceptions related to COVID-19. We sought to understand how the work environment had responded to the public health crisis and what information or material barriers existed among workers.

Participants: Participants were mainly from Mexico and Central America (67.4%). They had an average age of 41 years old, and 57% of participants were female. On average, participants had been working in the meatpacking industry for 7 years.

Perceived risk

72.1% believed that they were at “high risk” for contracting COVID-19.

Almost **30%** of workers reported that they had not received any information from their employer related to COVID-19.

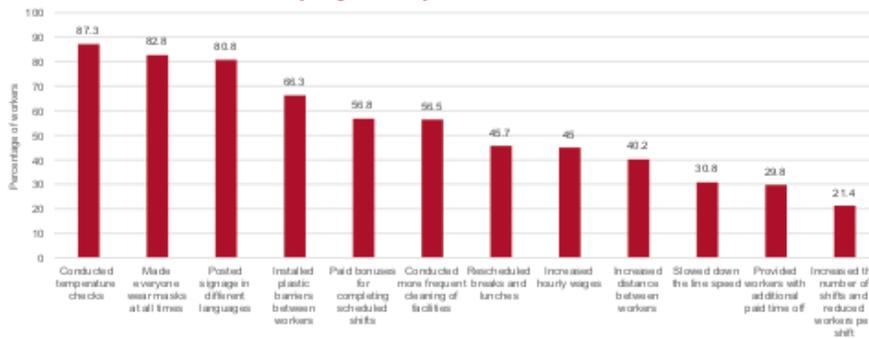
Testing & barriers to testing

42.2% had been tested at the time of the survey.

They noted barriers to getting tested including:

- Not sick so no need to be tested (44.4%)
- Unsure where testing locations were in their community (9.2%)
- Cost of testing (9.2%)
- Not sure what to do if they tested positive (8.6%)
- No testing available in their community (6.1%)

Employer responses to COVID-19



Recommendations

1. Provide culturally and linguistically appropriate information on COVID-19 transmission, health risks, and preventive strategies in the plant.
2. Provide paid sick leave benefits for COVID-19 related concerns.
3. Communicate COVID-19-related updates, policies, & procedures clearly and consistently to all levels of organization.
4. Ensure supervisors promote the health and well-being of team members.
5. Provide workers with a mask at the start of each shift and make additional masks available throughout the shift.
6. Enhance training opportunities for workers (e.g., proper mask use/care; sanitation guidelines; return to work procedures).
7. Inform workers about the contact tracing process within the plant and improve transparency on the number of positive cases in the workplace.
8. Ensure appropriate social distancing strategies within the plant (e.g., locker rooms, cafeterias, hallways, and restrooms) and stagger breaks.
9. Adhere to the Meatpacking Industry Workers Bill of Rights.
10. Partner with public health departments and community organizations to foster culturally and linguistically appropriate COVID-19 outreach and education.
11. Establish a consortium of community resources to assist workers and their families in case there are temporary closures or reductions in force.

